Date Received STATEMENT OF ECONOMIC INTERESTS CALIFORNIA FORM RECEIVED MAIR POLITICAL AUTICES COMMISSION ECEIVE FAIR POLITICAL PRACTICES COMMISSION **COVER PAGE** 2011 JAN -7 PM 1: 09 Public Document Please type or print in ink. NÁME (LAST) (FIRST) (MIDDLE) Jones Susan Eva CIDECI

1. Office, Agency, or Court			
Name of Office, Agency, or Court:			
City Council			
Division, Board, District, if applicable:			
Your Position:			
City Council member			
If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)			
Agency:			
Position:			
2. Jurisdiction of Office (Check at least one box)			
☐ State			
County of			
⊠ City of Healdsburg			
Multi-County			
☐ Other			
3. Type of Statement (Check at least one box)			
Assuming Office/Initial Date: 12 / 06 / 10			
Annual: The period covered is January 1, 2009, through December 31, 2009.			
-or-			
O The period covered is/, through December 31, 2009.			
Leaving Office Date Left://(Check one)			
O The period covered is January 1, 2009, through the date of leaving office.			
-or-			
O The period covered is/, through the date of leaving office.			
Candidate Election Year:			

Y				
4. Schedule Summary				
➤ Total number of pages 1 including this cover page:				
➤ Check applicable schedules or "No reportable interests."				
I have disclosed interests on one or more of the attached schedules:				
Schedule A-1 Yes – schedule attached Investments (Less than 10% Ownership)				
Schedule A-2 Yes – schedule attached Investments (10% or Greater Ownership)				
Schedule B				
Schedule C Yes – schedule attached Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)				
Schedule D Yes – schedule attached Income – Gifts				
Schedule E				
-or-				
No reportable interests on any schedule				

5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Sig	ned	December 7, 2010	
Signatur		, , , ,	
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FPPC Toll-Free Helpline: 866/ASK-FPPC www.fppc.ca.gov